PTO/SB/06 (07-06)

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/749,102			ing Date 30/2003	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN ALL ENTITY
FOR			NUMBER FI	.ED N	NUMBER EXTRA		RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))			N/A		N/A		N/A		]	N/A	
SEARCH FEE (37 CFR 1.16(k), (i), or (m))			N/A		N/A	]	N/A		]	N/A	
EXAMINATION FEE (37 CFR 1.16(a), (p), or (q))			N/A		N/A	]	N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		mir	us 20 = *		1	x \$ =		OR	x s =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))			m	inus 3 = *		1	x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE is	heets of pap s \$250 (\$125 dditional 50	ngs exceed 100 ion size fee due i) for each on thereof. See 7 CFR 1.16(s).							
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))						]			]		
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		]	TOTAL	
									ER THAN ALL ENTITY		
AMENDMENT	02/06/2009	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 54	Minus	<b></b> 58	= 0	1	x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 3	Minus	***3	= 0	1	x \$ =		OR	X \$220=	0
M	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)											
AMENDMENT		CLAIMS REMAININ AFTER AMENDME	IG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16(i))		Minus	**	=	]	x \$ =		OR	x \$ =	
M	Independent (37 CFR 1,16(h))	٠	Minus	***	=	]	x \$ =		OR	x s =	
	Application Size Fee (37 CFR 1.16(s))					l			1		
ΑN	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						TOTAL		OR		
									OR	TOTAL ADD'L FEE	
"If the entry in column 1 is less than the entry in column 2, write "o" in column 3. Legal Instrument Examiner: "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

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